



STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION

Occupational & Professional Licensing Division

Telephone: (860) 713-6155

WebSite: www.state.ct.us/dcp/

APPLICATION FOR
BOXING FACILITY REGISTRATION

INSTRUCTIONS:

This application **must be accompanied by a check or money order** in the amount of **\$25.00**, made payable to: ***"Treasurer, State of Connecticut"***.

→ **In order to be registered you must attach a copy of each of the following:**

- 1) Certification from your local building official attesting to the suitability of your premises for sparring or holding a boxing contest
- 2) Certification from your local fire marshal attesting that the facility is in compliance with all fire codes
- 3) A full description of the facility's sanitary facilities and emergency medical facilities

→ Return your completed application, certifications and registration fee to:

Department of Consumer Protection
License Services Division
165 Capitol Avenue
Hartford, CT 06106

Please furnish the information below:

Name of Facility			
Street Address		City	State
			Zip Code
Telephone Number (with area code)	FEIN Number		Email Address
Name of Owner of the Facility			
Name of the Manager of the Facility			